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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. <b>09/800,839</b>	FILING DATE			
APPLICANT(S)											
4-21-04							10/11/04				
CLAIMS											
APPLICANT		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT							
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TOTAL DEP.	11		11								
TOTAL CLAIMS	21		21								